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PTO/SB/01 (10-00)

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## DECLARATION — Utility or Design Patent Application

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or Bar Code Label **20876**  Correspondence address below

Name **Alfred J. Mangels**

Address **4729 Cornell Road**

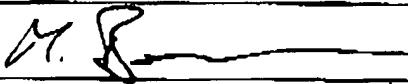
Address

City <b>Cincinnati</b>	State <b>Ohio</b>	ZIP <b>45241</b>
Country <b>US</b>	Telephone <b>(513) 469-0470</b>	Fax <b>(513) 469-6030</b>

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**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle (if any)) <b>Markus</b>	Family Name or Surname <b>BAUMANN</b>
---	--

Inventor's Signature 	Date <b>12/06/2001</b>
--	------------------------

Residence: City <b>Bühl</b>	State	Germany Country	German Citizenship
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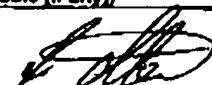
Mailing Address **Rosenweg 10**

Mailing Address

City <b>Bühl</b>	State	ZIP <b>D-77815</b>	Country <b>Germany</b>
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**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle (if any)) <b>Lother</b>	Family Name or Surname <b>MOSER</b>
---	--

Inventor's Signature 	Date <b>10/10/02</b>
---	----------------------

Residence: City <b>Ottersweier</b>	State	Germany Country	German Citizenship
------------------------------------	-------	--------------------	-----------------------

Mailing Address **Tanzbühl 4**

Mailing Address

City <b>Ottersweier</b>	State	ZIP <b>D-77833</b>	Country <b>Germany</b>
-------------------------	-------	--------------------	------------------------

Additional inventors are being named on the **1** supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/6B/02A (11-00)

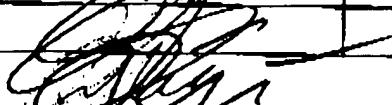
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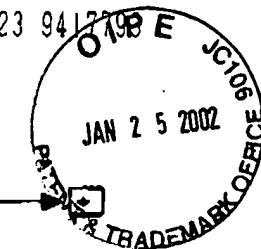
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle [if any])  Werner		Family Name or Surname  KREISS	
Inventor's Signature  		Date  28.11.01	
Residence: City	Erlangen	State	Country Germany Citizenship German
Mailing Address Coburgerstrasse 43			
Mailing Address Werner Kreiss @de.inq.com			
City Erlangen	State	ZIP D-91056	Country Germany
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	09/945,551
Filing Date	September 2, 2001
First Named Inventor	Markus BAUMANN
Group Art Unit	
Examiner Name	
Attorney Docket Number	GS 0443 A US

I hereby appoint:

Practitioner(s) at Customer Number  Place Customer Number Bar Code Label here  
**OR**  
 Practitioner(s) named below:

Name	Registration Number
Alfred J. Mangels	22,805

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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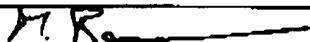
**OR**

<input type="checkbox"/> Firm or Individual Name	Alfred J. Mangels		
Address	4729 Cornell Road		
Address			
City	Cincinnati	State	OH
Country	U.S.A.		
Telephone	(513) 469-0470	Fax	(513) 489-6030

I am the:

Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

**SIGNATURE of Applicant or Assignee of Record**

Name	Markus BAUMANN
Signature	
Date	12/06/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/50/91 (10-00)

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POWER OF ATTORNEY OR  
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Application Number	09/946,551
Filing Date	September 2, 2001
First Named Inventor	Markus BAUMANN
Group Art Unit	
Examiner Name	
Attorney Docket Number	GS 0443 A US

I hereby appoint:

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OR

Practitioner(s) named below:

Name	Registration Number
Alfred J. Mangels	22,605

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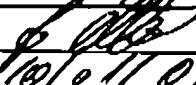
<input type="checkbox"/> Firm or Individual Name	Alfred J. Mangels			
Address	4729 Cornell Road			
Address				
City	Cincinnati	State	OH	Zip 45241-2433
Country	U.S.A.			
Telephone	(513) 469-0470	Fax	(513) 489-8030	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).

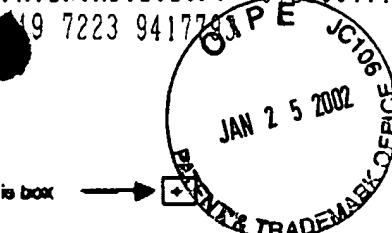
## SIGNATURE of Applicant or Assignee of Record

Name	Lothar MOSER
Signature	
Date	10/01/02

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POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT

Application Number	09/945,651
Filing Date	September 2, 2001
First Named Inventor	Markus BAUMANN
Group Art Unit	
Examiner Name	
Attorney Docket Number	GS 0443 A US

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OR

Practitioner(s) named below:

Name	Registration Number
Alfred J. Mangels	22,605

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Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

<input type="checkbox"/> Firm or Individual Name	Alfred J. Mangels			
Address	4729 Cornell Road			
Address				
City	Cincinnati	State	OH	Zip 45241-2433
Country	U.S.A.			
Telephone	(513) 469-0470	Fax	(513) 489-6030	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name	Werner KREISB
Signature	
Date	30.11.01
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